RECEIVED

PTO/SB/17 (10-08) Approved for use through 09/30/2010, OMB 0851-0032

Fees Pald (\$)

\$3150.00

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). RECEIVED **Application Number** 10/074.019 FEE TRANSMIT Filing Date 02-14-2002 For FY 2009 First Named Inventor Ken Cameron **Examiner Name** BILGRAMI, ASGHAR H Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2443 OFFICE OF PETITIONS TOTAL AMOUNT OF PAYMENT Attorney Docket No. 0120-023 METHOD OF PAYMENT (check all that apply) ✓ Credit Card Money Order None I Other (please identify): ✓ Deposit Account Deposit Account Number: <u>50-7248</u> Deposit Account Name: PPG For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) ✓ Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES** Small Entity Small Entity Small Entity **Application Type** Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 330 165 540 270 220 110 Design 220 100 110 140 50 70 Plant 220 110 330 170 165 85 Reissue 330 165 540 270 650 325 Provisional 220 110 0 2. EXCESS CLAIM FEES Small Entity Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 52 26 Each independent claim over 3 (including Reissues) 220 110 Multiple dependent claims 390 195 **Total Claims** Extra Claims Fee (\$) Fee Pald (\$) Multiple Dependent Claims - 20 or HP = Fee (\$) Fee Pald (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claima Fee (\$) Fee Paid (\$) -3 or HP = HP = highest number of independent claims paid for, if greater than 3. **APPLICATION SIZE FEE** If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 Total Sheets - 100 = /50 = (round up to a whole number) x 4. OTHER FEE(S)

| SUBMITTED BY | | | |
|------------------|---------------------------------------|---|------------------------|
| Signature | /Kenneth B. Leffler, Reg. No. 36,075/ | Registration No. (Attorney/Agent) 36075 | Telephone 703-848-2332 |
| Name (Print/Type | Kenneth B. Leffler | | Date August 28, 2010 |

Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Petition to Correct Errors in Entity Status

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.